

Children with the following conditions do not have to be excluded from school or out-of home childcare, **if they feel well enough to participate in regular activities:**

- Bronchitis
- Canker Sores
- Chronic Hepatitis B
- Colds or coughs, without fever or other signs of illness
- Cold Sores
- Croup
- CMV: Cytomegalovirus
- Ear Infection
- Fifth Disease
- Hand-Foot-and-Mouth Disease
- HIV Infection
- Illnesses from Tick Bites like Lyme Disease or Rocky Mountain Spotted Fever
- Malaria
- MRSA, if child is only a carrier
- Pinworms
- Pneumonia
- Rash without fever or behavior change
- Red eye without yellow or green discharge, fever or matting
- RSV: Respiratory Syncytial Virus
- Roseola
- Thrush
- Warts, including molluscum contagiosum
- Urinary Tract Infection
- West Nile Virus
- Yeast Diaper Rash

Help your child stay healthy and ready to learn.

We hope that your child never has to miss school or childcare because of illness or disease. The best protection from disease is prevention. You can help prevent many illnesses by making sure your child receives immunizations and washes his or her hands often.

Updated August 1, 2013

Childcare Exclusion List



This also serves as the **School Exclusion List** for Kindergarteners (K3, K4, K5) and Medically Fragile Students in Grades 1-12.

If you think that your child has an illness that can be spread to others, please keep him or her home from school or out-of-home childcare. Contact your doctor or clinic.

Dear Parents:

Exclusion Lists indicate for which illnesses a child must be kept out of (excluded from) school or out-of-home childcare. They also indicate what notes are needed for children to return to school or childcare after certain illnesses.

The information in this brochure applies to:

- All children in out-of-home childcare,
- All students in 3, 4, and 5-year-old kindergarten, and
- Medically Fragile Students in 1st through 12th grades. Medically Fragile Students are those students with special healthcare needs and/or developmental delays who require close assistance with feeding or personal hygiene activities. You and your child’s school will determine if your child is considered medically fragile.

If you have any questions about the Childcare Exclusion List, please contact your child’s school or your local health department.

Questions to Ask When Your Child is Sick:

1.

Does your child’s illness keep him/her from comfortably taking part in activities?

Y

N
2.

Does your sick child need more care than the staff can give without affecting the health and safety of other children?

Y

N
3.

Could other children get sick from being near your child?

Y

N

If the answer to any of these questions is “Yes,” please keep your child out of school or childcare.

When should sick children stay home from school?

If your child feels too sick to go to school, please keep her home.

Children should also stay home if they have symptoms of illnesses that they might be able to spread to others.

Does my child need to stay home when he just has a cold?

Most children with mild colds, who have no fever and who feel well enough to go to school, do not need to stay home. Most colds spread in the 1-3 days before children show symptoms such as a runny nose or slight cough.

How long will my child need to stay home if she is sick?

The inside of this brochure explains how long children should stay home after they become ill with excludable conditions.

Would my child have to stay out of school if he was not sick?

Sometimes children will also have to stay home from school if they are exposed to some diseases that are preventable by vaccines. Your school or DHEC will discuss this exclusion with you.

What does my child need to come back to school?

The list inside this brochure shows whether or **Medical Note** or **Parent Note** is required for your child to return to school after exclusion for illness.

What about other activities?

Students with illnesses spread by close contact, like lice, scabies, shingles, or staph or strep skin infections, may not be allowed to participate in some sports or physical education activities.

Childcare Exclusion List:

A Quick Reference for Parents

Chicken Pox / Varicella

Children with chicken pox may return with a **Parent Note** once all of the sores and blisters are dried & scabbed over, or, if there are no scabs, until no new sores appear for 24 hours.

Diarrhea: For most kinds of diarrhea (defined as 3 or more loose stools in 24 hours):

- Children should stay home until diarrhea stops, or until a doctor clears the child to return to school. Your child can return with a **Parent Note** when the diarrhea has stopped for at least 24 hours.
- Children must have a **Medical Note** to return to school after having diarrhea that contains blood or mucus.
- Students who can use the restroom or whose stools are contained in diaper-type underwear do not have to be out of school if the diarrhea is known to be from a non-contagious condition, or if the diarrhea continues after the child completes antibiotics for a diarrhea-causing illness.
- A medically fragile child or child who needs help with toileting may be excluded for fewer than 3 episodes if her condition makes it hard for her caretakers to maintain sanitary conditions in the classroom.

Diarrhea from diagnosed infections:

Campylobacter, Norovirus, Rotavirus, Shigella, and most types of Salmonella: Children may return with a **Parent Note** after diarrhea stops for 24 hours.

A **Medical Note** is required for children with diarrhea from the conditions below:

- *E. coli*: For the most severe type of *E. coli*, students of any age must be out of school until the diarrhea stops and 2 lab tests, taken at least 24 hours apart, test negative for *E. coli* **O157:H7**.
- *Giardia*: When diarrhea stops for at least 24 hours or child has taken antibiotics for at least 24 hours.
- *Salmonella Typhi* (*Typhoid fever*): After 24 hours without diarrhea and 3 negative lab tests, if a doctor clears the child to return.
- *Shigella*: After 5 days of antibiotics or a negative lab test.

Fever by itself:

Infants under 4 months old: Keep home for rectal temperature (taken in the bottom) 101° F or higher.

Children over 4 months old: Keep your child home for a fever 101° F or higher by mouth, 100° F or higher if taken under the arm, or 102° F or higher if taken in the bottom.

Children can return with a **Parent Note** when the fever is gone.

Fever with Rash, Behavior Change or other Symptoms

Take your child to a doctor or clinic for any fever if he or she also has signs of severe illness such as a rash, change in behavior, earache, vomiting, confusion, sore throat, or irritability. A **Medical Note** is required to return.

Flu / Influenza or Influenza-Like Illness (ILI)

A student with ILI or the flu will be excluded for a fever of 100° F with cough and/or sore throat until he is fever free for at least 24 hours, without any fever medicines.

German Measles / Rubella / 3 Day Measles

Keep your child home until 7 days after rash starts. He may return with a **Medical Note**.

Head Lice

Children with crawling lice or nits (eggs) ¼ inch or closer to the scalp may be sent home **at the end of the day, if head-to-head contact with other children can be avoided. Otherwise, they may be excluded immediately.**

Your child may return with a **Parent Note** after her first treatment with a school-approved lice-removal product, if there are no active lice crawling on your child’s head.

The school or center should check your child 7 days after treatment for any newly hatched, crawling lice. If any are present, your child will have to be re-treated for lice in order to come back to school or childcare.

Hepatitis A / Yellow Jaundice

Children with acute hepatitis A may return with a **Medical Note** 1 week after the start of the jaundice.

HIB (Haemophilus influenzae Type B)

Students with proven HIB infection need to be out of school until at least 24 hours after they complete their antibiotics. A **Medical Note** is required to return.

Impetigo

If your child has dry, honey-colored, crusty sores that cannot be covered, he will be sent home at the end of the school day until 24 hours after starting antibiotics.

If the sores are weepy, oozing or wet, or cannot be covered and kept dry, the child will be sent home immediately. He may return after 24 hours of antibiotics, if the sores have stopped oozing and are starting to get smaller. A **Medical Note** is needed to return to school.

Measles / Red Measles / 10 Day Measles

Children with measles can return with a **Medical Note** 4 days after the rash begins, if they have no fever and feel well enough to participate in regular school activities.

Meningitis

A student with signs of meningitis (high fever, rash, stiff neck) must remain out of school until a healthcare provider says that the student may return.

Mononucleosis (Mono)

Your child’s physician will decide when your child is well enough to come back to childcare or school.

Mouth Sores inside the mouth

Children with sores inside the mouth, who also drool, should stay home until their health care provider says that the sores are not contagious. A **Medical Note** is required.

Mumps

Children with mumps can return with a **Medical Note** 5 days after the beginning of swelling.

Pink-eye / Conjunctivitis

Children whose eyes are red or pink, and who have eye pain and reddened eyelids, with white or yellow eye discharge or eyelids matted after sleep should not be in school until they have been examined and treated. A **Medical Note** is required to return.

Rash

Students who have a rapidly spreading rash or a rash with fever or behavior change are excluded from school immediately. A **Medical Note** is required to return.

Ringworm

Children with **ringworm of the scalp** must remain out of school until they have begun treatment with a prescription oral antifungal medication. Your child may return with a **Medical Note**.

Children with **ringworm of the body** may return with a **Parent Note** once they have begun oral or topical antifungal treatment, unless the affected area can be completely covered by clothing.

Scabies

Children with scabies should be out of school until treatment/medication has been applied. A **Medical Note** is required to return.

Shingles

Keep children home who have shingles lesions/sores/ blisters that cannot be covered. Your child may return with a **Parent Note** once the lesions are dried/scabbed.

Staph or Strep Skin Infections (includes MRSA) or other skin infections such as Herpes Gladiatorum

Students may attend unless their lesions/sores are oozing or draining and cannot be covered with a watertight dressing.

“Strep Throat” / Streptococcal Pharyngitis

Your child with “Strep throat” can return to school with a **Medical Note** 24 hours after starting antibiotics if there is no fever.

Stomach ache (severe) or abdominal pain

A child with severe stomach pain for 2 hours or more should see a healthcare provider, especially if the child has a fever.

Sty (or Sty)

A child with a draining/oozing sty should remain home until the draining stops.

Tuberculosis (TB)

A child with TB should be kept home until the doctor treating the TB writes a **Medical Note** that says that the child is no longer contagious.

Vomiting

A child who has vomited 2 or more times in 24 hours should stay home until the vomiting stops, unless she is known not to be contagious.

Whooping Cough / Pertussis

Children with whooping cough can return to school with a **Medical Note** after completing 5 days of prescribed antibiotics, unless directed otherwise by DHEC or your school nurse.

If your child has not received immunizations to protect against diseases like Measles, Mumps, German measles, or Chickenpox, he or she may need to be out of school if there are cases of these conditions in the school. Your school nurse will provide more information if there is an exposure.



Bureau of Disease Control Division of Acute Disease Epidemiology

2600 Bull Street, Columbia, SC 29201
Phone: 803.898.0861 • Fax: 803.898.0897
www.scdhec.gov/health/disease/exclusion.htm